

NIH Labor-Management Partnership Council Meeting Minutes

Thursday, May 22, 2003

Attendees: Arturo Giron, Walter Jones, Leonard Taylor, Tom Fitzpatrick, Howard Hochman, Sandra Miller, Michael Bowler, Alberta Bourn, Paul Donaldson, Mike Laven, Clyde Bartz, Helene Noble, Craig Kalman, Emma Mixon, Rita Sweeney, Linda Tarlow and Barry Kevin.

Facilitator: Fern Kaufman

Old Business: Minutes of the April 17, 2003 meeting were reviewed, amended and approved.

New Business:

A-76 Update: Mr. Tom Fitzpatrick provided an update on the long-awaited decision on the revised version of the A-76 Circular from OMB. That decision is any day now. The new program will require incremental progress, where the current program is focused on the end result. The NIH inventory for FY04 is due to HHS on May 12th, and is due to the Office of Management and Budget (OMB) on June 30th.

The FY04 study schedule has not been formally issued yet, but the Fire Fighter function will be included and initiated by Mid-June of 2003. A brief discussion of what the fire fighting and prevention services should be titled for study purposes and it was tentatively decided that the term "Fire Services" would be most appropriate. In response to a union inquiry, Ms. Linda Tarlow asked whether the janitorial services and housekeeping services for the Clinical Center were ever included in the FY03 study. Mr. Fitzpatrick stated that they were not. Mr. Paul Donaldson inquired when the Commercial Activities Review Team (CART) would be coming to the fire department to begin the study. Mr. Fitzpatrick said sometime soon – next month most likely.

Mr. Fitzpatrick informed the Council that he is leaving NIH. He accepted a position with the USDA Forest Service, running their A-76 program. At NIH, Tim Wheelles is still the point-man for the NIH A-76 program and Mr. Fitzpatrick's position was advertised and is now closed.

The Employee Assistance Program (EAP): Dr. Michael Bowler, Program Coordinator, ORS. Handouts were provided. Historically, the EAP was created to deal with substance abuse problems during the 1970's with referrals to local treatment facilities. The program has grown over the years to include additional services. It is important that customers are aware that the EAP staff are only consultants and that action decisions reside with the Manager or Supervisor. It is recognized that the EAP increases the organization's capacity to manage operations and employees. All EAP services are confidential and all EAP communications with Supervisors is done only with the employee's approval.

Substance abuse treatment: what's available locally – it depends on the employee's medical coverage. Currently, the Clinical Center provides treatment, but it is limited to alcoholics. This restriction is being lifted for employees who are multi-substance abusers. Many of the outside treatment programs are closing due to insurance limitations. All in all, out patient treatment is best since the employee is not removed from the workplace.

Dr. Bowler briefly discussed changes he has noticed taking place throughout the NIH workforce during the last year that is mostly due to the added stress related to the A-76 program implementation. Mr. Fitzpatrick said that in his experience it is best for all concerned to recognize as early as possible that the best way to deal with the process is to get it over with as quickly as possible. More problems crop-up as the process drags on. The bottom line is that you cannot force change; it is really up to the employee to recognize the impact on them individually and then for them to take action. Walter Jones suggested that lunchtime stress management sessions be held. He is concerned that the message from NIH management is “don’t worry” since the policy is that no one will lose a job. He also suggested that it be considered to change EAP’s name. Dr. Bowler said that is not an option since that name is embodied in the legislation.

Miscellaneous Issues:

New Council Coordinator: Mr. Barry Kevin informed the Council that he has accepted a position with the Veterans Administration Medical Center in San Diego, California and that Ms. Rita Sweeney from the NIH Labor Relations Office will be assuming the duties as Council Coordinator immediately.

DHHS Performance Appraisal Addendums: Mr. Paul Donaldson discussed his observation that the addendums that all employees are being required to sign as part of their performance appraisals do not pertain to him or his bargaining unit employees directly. Ms. Helene Noble explained that while each employee does not accomplish each element directly, they do contribute indirectly to the accomplishment of those elements by the NIH and the DHHS. He said his people would sign them.